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RUEHHS/ASEAN REGIONAL FORUM COLLECTIVE
RUEHZN/ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE
RUEHPH/CDC ATLANTA GA
RUEHRC/DEPT OF AGRICULTURE WASHINGTON DC
RUCPDO/DEPT OF COMMERCE WASHINGTON DC
RUEAUSA/DEPT OF HHS WASHINGTON DC
RUEHSUN/USUN ROME IT

UNCLAS SECTION 01 OF 03 HANOI 001924

SIPDIS

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STATE FOR EAP/MLS, EAP/EP, INR, OES/STC, OES/IHA, MED
STATE PASS TO USAID FOR ANE AND GH
HHS/OSSI/DSI PASS TO OGHA (WSTIEGER/LVALDEZ/CHICKEY), FIC/NIH
(GLASS), FDA (MPLAISER)
CDC/COGH FOR SBLOUT/KMCCALL/RARTHUR, PASS TO NCZVED/DFBMD/EDEB
(RTAUXE/EMINTZ) AND GDD, IEIP, DEOC
USDA PASS TO APHIS, FAS (OSTA AND OCRA), FSIS
BANGKOK FOR RMO, CDC (MMALISON/SMALONEY/AHENDERSON), USAID/RDM/A
(CBOWES/JMACARTHUR), APHIS (NCARDENAS), REO(JWALLER)
BEIJING FOR HHS HEALTH ATTACHE (BROSS)
ROME FOR FAO

E.O. 12958: N/A

TAGS: [TBIO](#) [AMED](#) [AMGT](#) [CASC](#) [EAGR](#) [PINR](#) [VM](#)

SUBJECT: UPDATE OF SERIOUS ACUTE DIARRHEA OUTBREAK IN NORTHERN
VIETNAM

REF: Hanoi 1891

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1. (SBU) Summary. Vietnam's acute diarrhea outbreak expanded from 11 to 14 provinces and municipalities throughout northern Vietnam over the past week, with many victims testing positive for cholera. However, informal information from one of Hanoi's major referral centers indicates the epidemic may be easing. Though Vietnam traditionally experiences sporadic, individual cholera cases from time to time, this is the first large-scale outbreak since the 1970s. While initial cases have been linked to the consumption of raw shrimp paste, the Government of Vietnam (GVN) is warning its citizens about the possible dangers of all uncooked foods and unsanitary water sources. The GVN has initiated an active response and on November 12 the Ministry of Health (MOH) officially requested World Health Organization (WHO) assistance. WHO, in turn, invited U.S. Centers for Disease Control (CDC) participation in the WHO response team. The U.S. Embassy disseminated a warden notice to U.S. citizens about the epidemic on November 8. End Summary.

Serious Acute Diarrhea Continues to Spread

2. (U) On November 9, MOH confirmed the continued spread of "serious acute diarrhea" in northern Vietnam. Official estimates of hospitalizations have risen to about 1660 spread over 14 northern municipalities and provinces, an increase of 3 provinces from those reported in reftel on November 5, with over 530 persons seeking medical attention in Hanoi. MOH has reported that the number of new cases has decreased in Hanoi, Hai Duong, Thanh Hoa, Hai Phong, and Hung Yen provinces and a contact at the National Institute of Infectious and Tropical Diseases (NIITD)/MOH, a major referral center in Hanoi, informally reported to a CDC-Hanoi staff member that the number of new cases referred each day to NIITD has dropped to 10 to 15. In Hanoi, hospitals have begun to discharge many patients. However, the most recent reports from November 9 stated

that the outbreak continues to expand in Ha Tay and Vinh Phuc provinces. In Hanoi, a chef at a five-star hotel reportedly tested positive for cholera, leading MOH Vice-Minister Trin Quan Huan to contemplate shutting down the establishment. Though still confined to northern Vietnam, officials remain concerned that it may spread nationwide through internal labor migration. Local newspapers reported the hospitalization in Ho Chi Minh City of two patients suffering from acute diarrhea. Test results for one patient came back negative for cholera, while testing on the second patient is not yet complete. Continued flooding in many areas of the country also creates unsanitary conditions conducive to the further spread of the disease.

Many Patients Test Positive for Cholera . . .

13. (SBU) Despite public statements to the contrary in a November 8 press briefing by the Ministry of Foreign Affairs Spokesperson Le Dzung, the MOH has reported to Embassy officers that it has isolated the *Vibrio cholera* O1 El Tor strain from samples taken from several patients. Further, in addition to earlier MOH statements (reftel), the newly-created Central Committee for Acute Diarrhea Control publicly announced that over 200 victims have tested positive for cholera and while most headlines have referred to "acute diarrhea," the underlying articles note the presence of cholera. Nevertheless, Vietnam clearly remains sensitive about referring the outbreak as "cholera," and the MOH insisted in its negotiations with the WHO for technical assistance that the two sides instead use the phrase "serious acute diarrhea outbreak." Embassy has no information yet on the susceptibility of this strain to antibiotic treatments.

. . . Including One Non-American Expatriate

14. (SBU) MOH testing confirmed that an expatriate treated at a Hanoi medical clinic for severe watery diarrhea was infected with V.

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cholera. The director of the medical facility, which conducted the initial positive test, had reported to the case to the Embassy and noted that the facility - which caters to expatriates -- had not treated any Vietnamese patients. The patient had recently traveled north of Hanoi. Mission's Health Attache Office verified that the WHO has received this report. Embassy MED Unit confirmed no reported cases in the other two major international medical clinics in Hanoi that largely serve expatriates. The Embassy issued a warden notice to the expatriate American community on November 8.

Largest Outbreak in Northern Vietnam since the 1970s

15. (U) Sporadic cases of cholera occur every year in Vietnam, especially in rural areas. Though cholera is more endemic to southern Vietnam, in the recent past, a few northern provinces and the municipalities of Haiphong and Hue suffered a small number of easily controlled cases. Outbreaks of non-cholera food-borne associated diarrhea are relatively common in Vietnam. However, the last large scale cholera outbreak to hit Haiphong and Hanoi occurred in the 1970s.

GVN Response

16. (U) Though early press reports stated that the outbreak initially stemmed from products containing raw shrimp paste, GVN warnings have expanded to cover raw vegetables, street food, and presumed unsanitary water sources. The media also has reported infections of caregivers and through the consumption of certain processed foods. On November 11, Prime Minister Nguyen Tan Dung directed the MOH to coordinate a multi-sector task force to respond to the issue. The government has continued rigorous interventions, targeting citizens, health care providers, and environmental control, including a continued ban on the sale of shrimp paste, chemical disinfection of exposed areas and provision of preventive antibiotic therapy to exposed persons. Most recently, Vietnamese authorities began to shut down non-licensed restaurants, increased health inspections of

rail travelers, and moved to ensure food quality on Vietnam Airlines. Health authorities plan to provide one million gloves to restaurants and establish an information hotline. Along with these efforts, the GVN has instituted surveillance and preventive efforts to prevent the expansion of the outbreak to the central and southern parts of the country. The Ho Chi Minh City preventive medicine department disinfected the residences and surrounding area of the two recent diarrhea patients and has been proactively raising public awareness, inspecting suspected foods, and preparing responses if the epidemic moves south.

Vietnam Requests WHO Assistance

17. (SBU) On November 8, the WHO Country Representative met with the Minister of Health. On November 12, the MOH formally requested WHO assistance, which will be coordinated by WHO Regional Office for the Western Pacific (WPRO) based in Manila. CDC has maintained close communications throughout the situation with WHO, which has requested CDC-Hanoi to prepare to contribute to the WHO response to the GVN request. WPRO has notified CDC-Vietnam that CDC-Bangkok's Dr. Alden Henderson, an epidemiologist, will be part of the WHO response team that will arrive this week.

U.S. Prepared to Participate in WHO Effort

18. (SBU) Health Attache and CDC-Hanoi Chief of Party have coordinated with Department of Health and Human Services and CDC principals to review the current situation and prepare an organized USG response to the expected WHO request for assistance. CDC-Bangkok also briefed Embassy health officers on recent cholera activity in Thai refugee camps and CDC-Hanoi has lined up additional

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suitable candidates from CDC-Bangkok with requested CV/resumes in-hand who can deploy immediately. CDC-Hanoi has informed WHO/WPRO of its continued readiness to assist.

19. (SBU) CDC participation in the response meets two critical objectives: responding to a public health crisis and demonstrating to WHO and MOH its ability to add value to a WHO emergency response effort. Accordingly, the set of persons offered have strong diplomatic skills and experience with an international team approach. The primary public health objective is to control the outbreak and improve treatment capacity to minimize mortality. To this end, if successful, the first CDC responders may need to request additional CDC resources in the areas of food-and-water-borne illness, in-depth epidemiology, water sanitation, laboratory, and informatics.

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